

Fig. 1

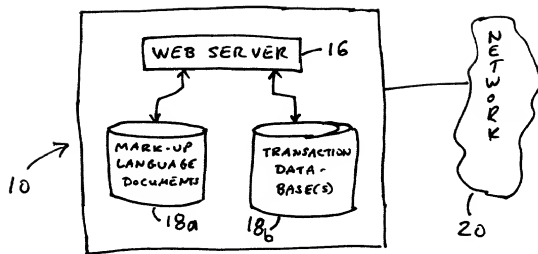


Fig. 2

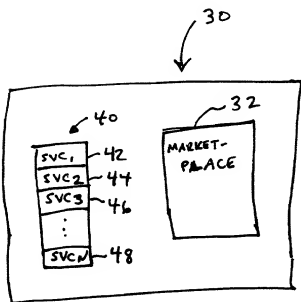


Fig. 3

Register

Register as

Company

Department

Address form

☐ Ms

☐ Mr

Name

First name

Title

Position

Telephone

Telefax

E-mail

Street and No.
(or P.O. Box)

Postal Code

Town/city

Country

Other country
(not in list)

User Name

Password

Confirm
Password

☐ I have read the terms of business and agree to them

Fig. 4

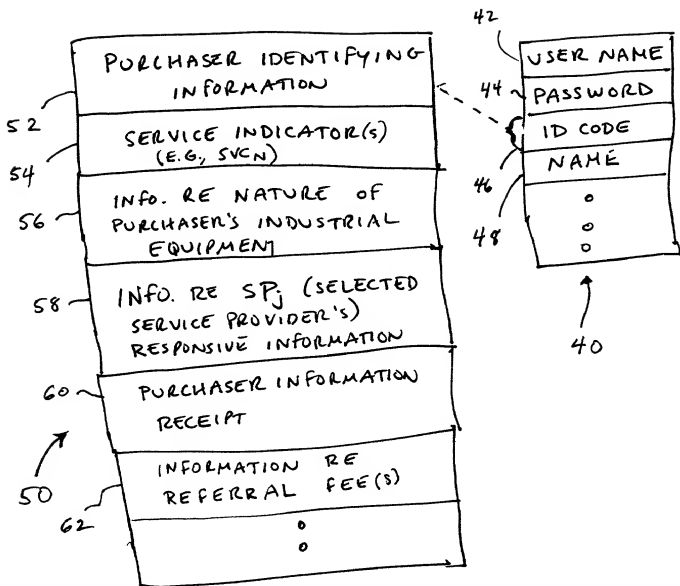


Fig. 5

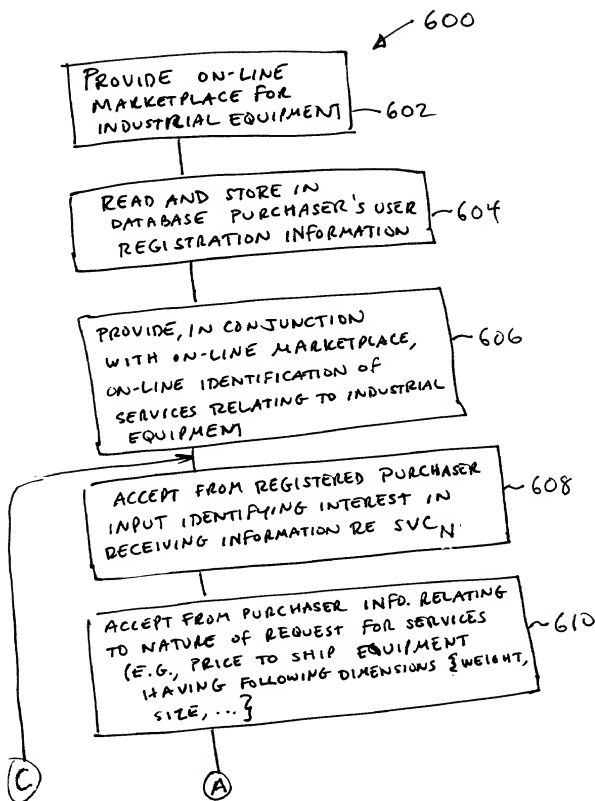


Fig. 6A

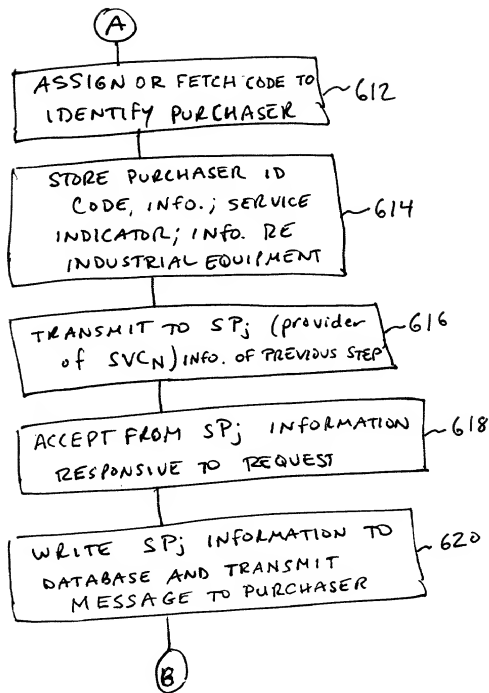


Fig. 6B

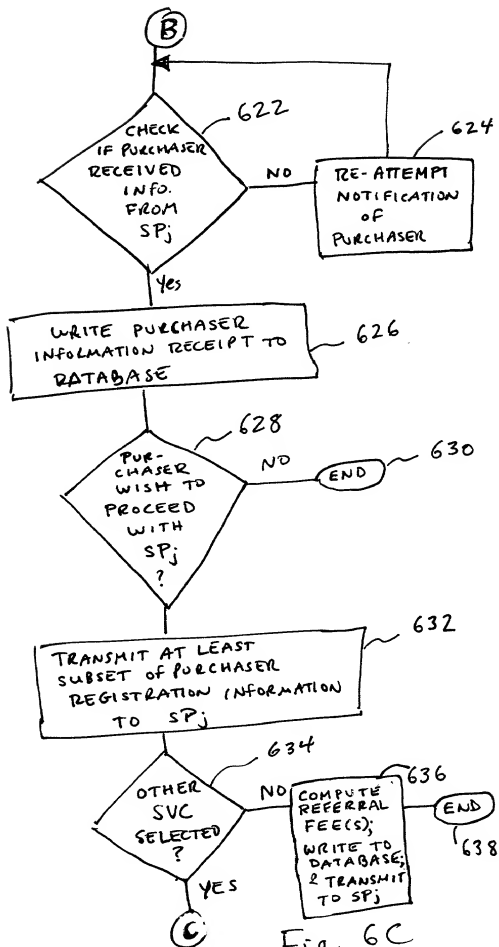


Fig. 6C

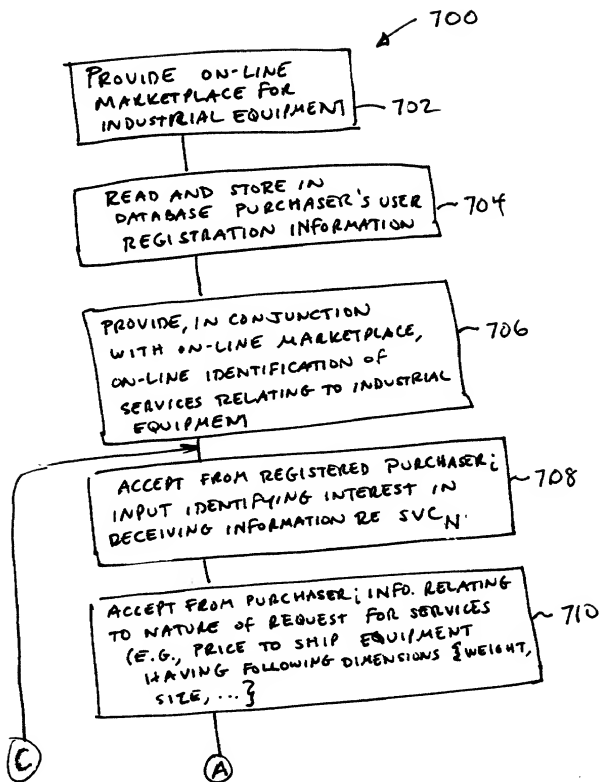


Fig. 7A

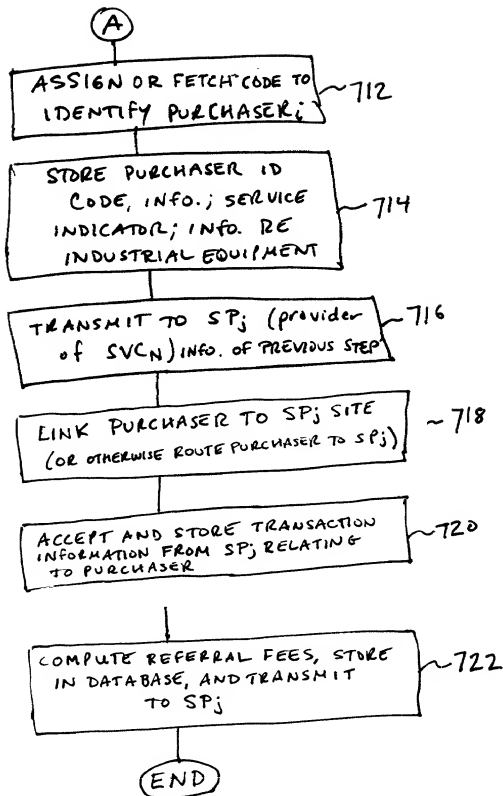


Fig. 7B

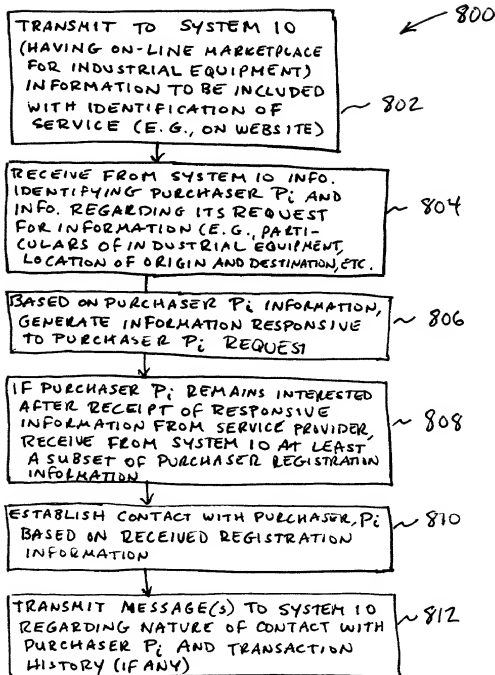


FIG. 8